

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE
2009 MAY 19 PM 1:40

COMMITTEE NAME (Must be same as on Statement of Organization)

Friends of Davenport Promise

IMPORTANT: Indicate by # type of committee you are reporting for: 11
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Political Party (If applicable)

Office Sought

District (If Senate or House)

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. # _____
Logged in _____
Scanned _____
Computer _____
Audited _____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 38A.401(3), the candidate, for a

Kenneth L. Cron
SIGNATURE OF PERSON FILING REPORT

563/355-1387
TELEPHONE

5/19/09
DATE SIGNED

I AM FILING A MAY 19, 2009 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
March 3, 2009
County in which election is held
Davenport/Scott

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (If final report balance must be zero)

**UNPAID BILLS (From Schedule D - Attach Schedule D)

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

7,037⁸⁸
17,700¹⁷
0
0
24,738⁰⁵
24,590³¹
0
147.74
0
268184
0
YES ☒ NO
0

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)



SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Friends of Davenport Promise

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	IF FOR FUND-RAISER INCOME
2/26/09	ID# CK#	Republic Companies 737 Charlotte DAV. IA 52808		\$ 500 ⁰⁰	<input type="checkbox"/>
2/26/09	ID# CK#	Estes Construction P.O. Box 3608 DAV. IA 52808		500 ⁰⁰	<input type="checkbox"/>
2/26/09	ID# CK#	Ruhl & Ruhl Realtors 5403 Victoria Ave. Suite 100 DAV. IA 52807		500 ⁰⁰	<input type="checkbox"/>
3/2/09	ID# CK#	Davenport One 130 W. 2nd Davenport, IA 52801		15,100 ⁰⁰	<input type="checkbox"/>
3/2/09	ID# CK#	Terrence Lunardi 2443 E. Central Park Davenport, IA 52803		500 ⁰⁰	<input type="checkbox"/>
3/3/09	ID# CK#	Patricia Zamora 4835 W. Locust DAV. IA 52804		200 ⁰⁰	<input type="checkbox"/>
3/3/09	ID# CK#	Bank "pay pal" credit U.S. Bank Davenport, IA		.17	<input type="checkbox"/>
3/11/09	ID# CK#	Ruhl & Ruhl Commercial 5111 Utica Ridge Rd DAV. IA 52807		500 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

TOTAL (If last page of this schedule)

\$
\$ 17,700⁰⁰

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

FRIENDS OF DAVENPORT PROMISE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
2/26/09	ID# CK# 1107	Victory Enterprises 5200 SW 30th DAV. IA 52802	postcard mailings	\$7533 ⁶²
3/2/09	ID# CK# 1108	Victory Enterprises 5200 SW 30th DAV. IA 52802	phone calls	11,143 ⁵⁰
3/2/09	ID# CK# 1109	Jazzmyr Phillips 431 W. Locust Davenport, IA 52803	voter outreach	300 ⁰⁰
3/2/09	ID# CK# 1110	Genesis Medical Ctr. East 1237 E. Rusholme Davenport, IA 52803	Pizza for volunteer phone bank	66 ⁰⁰
3/3/09	ID# CK# 1111	Victory Enterprises 5200 SW 30th Ste. 7 DAV. IA 52802	phone calls	1558 ²⁴
3/3/09	ID# CK# 1112	Jersey Grille 5255 Jersey Ridge Rd Davenport, IA 52804	Election night gathering	288 ⁴⁶
3/5/09	ID# CK# 1113	David Vorland 124 N. Mitchell Preston, IA	Campaign coordination	1500 ⁰⁰
3/17/09	ID# CK# 1114	Robin Johnson 2117 58th St. Monmouth, IL 61462	targeting, messaging for mail, design	2000 ⁰⁰
SUB-TOTAL				\$24,389 ⁸²
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Friends of Davenport Promise

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
3/13/09	ID# CK#	U.S. Bank Davenport, IA 52801	Bank chgs	\$ 2. ¹⁴
3/27/09	ID# CK# 1115	Light Edge Solutions 215 10th St. Suite 1220 Des Moines, IA 50309	website	198 ³⁵
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 200.49
TOTAL (if last page of this schedule)				\$ 24,590 ³¹

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Friends of Davenport Promise

SCHEDULE
E
(Rev. 08/97)

IN-KIND
CONTRIBUTIONS

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
2/26/09	Karen Peachee 1004 57th Place Davenport IA 52806		campaign buttons	\$ 81 ⁸⁴	<input type="checkbox"/>
2/26/09	New Ventures Initiative 331 W. 3rd Davenport IA 52801		use of office space	600 ⁰⁰	<input type="checkbox"/>
2/27/09	Genesis Health System 1227 E. Rusholme Davenport IA 52803 (shown on DR-07C)		Advertorial supporting Promise	2000 ⁰⁰	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (If line page of this schedule				\$ 2681 ⁸⁴	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (related by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule E)